

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 109

Approved For Release 2000/04/11 : CIA-RDP64-00360R000400050011-1

J. S. _____ Cost Reimbursable
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. 548

To _____
(Payee)

PAID BY

SAPC 2564
COPY 1 OF 4

(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				5,455.	80 ✓
Use continuation sheet(s) if necessary							

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total 5,455. 80 ✓

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

Differences _____

STATINTL (Sign original only)

Date 11/7/55 *Payee _____
required when _____ (signed bill or bills)

STATINTL

Per _____ Title _____ Account verified; correct for (Signature or initials) JAA

Contract No. A101 Date _____ Req. No. _____ Date _____ Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

I Approved for \$ 5,455.80

STATINTL

SIGN
ORIGINAL
ONLY

By _____ Title _____

Title Approving Officer Date 11/16/55

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (For completion by Administrative Office)

Appropriation, limitation, or project symbol	Appropriation title				Limit'n. or Proj't. Amount	Appropriation Amount
Allotment symbol	Amount	Obligations liquidated	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			Symbol	Amount	Symbol	Amount

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in
{ Cash, \$ _____, on _____, 19____ Payee _____ } favor of payee named above.
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporation must be written in the space provided for the signature of the approving officer. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

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Title _____

Services Other Than Personal

CONTINUATION SHEET

SAPC 2569
COPY 1 OF 4

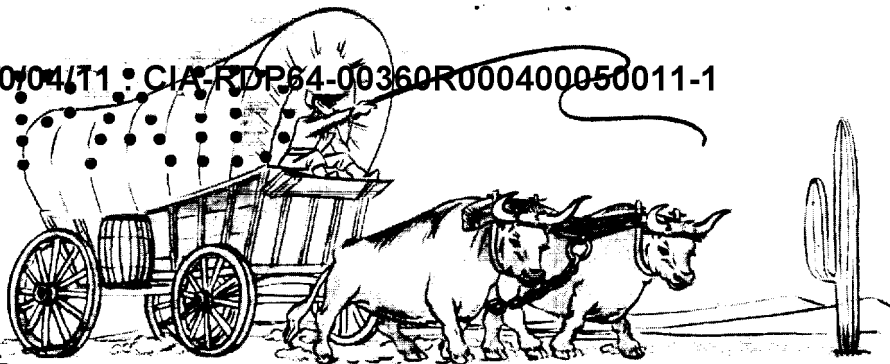
U. S. Cost Reimbursable Sheet No. 1 of Bureau Voucher No. 109
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
STATINTL		<u>PAYROLL</u> <u>SYSTEM I</u>					
		Direct Labor Costs properly chargeable to Contract A101 for the period 10-24-55 thru 10-30-55				STATINTL	
		Week Ending 10-30-55					
		Overhead computed at interim rate of [REDACTED]					
		Total Labor and Overhead				4,524.	80✓
		<u>OTHER COSTS</u>					
		<u>NAME</u> <u>CKT.#</u> <u>P.O.#</u>					
		Pioneer Printing 13988 9947		931.	00✓		
		Total Other Costs				931.	00✓
		Total Labor, Overhead and Other Costs				5,455.	80✓

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Pioneer

PRINTING and
LITHOGRAPH CO.



4717 WEST JEFFERSON BLVD.

REPUBLIC 2-9171

LOS ANGELES 16, CALIFORNIA

Ramo-Wooldridge Corp.
8820 Bellanca Ave.
Los Angeles 45, Calif.

Approved for
Payment

Prices and
Extensions

Bald

Account: 5021

No. 6035

No. 6035

DATE Sept. 30, 1955

YOUR ORDER NO. 9947

TERMS

SHIPPED TO

VIA

JOB NO.	QUAN.	DESCRIPTION	PRICE	AMOUNT
8464		Offset printing, plates, negatives, punching, gluing, folding of classified job.	Lot	950.00 19.00 931.00
FOR RESALE - NO TAX				
1% CASH DISCOUNT	10 DAYS	FROM DATE OF INVOICE		
NET - 10th MONTH FOLLOWING		5122 - 10/3		
Discount Only Allowed If Taken as per Above		5158 - 9/23		
		5159 - 9/27		
		5160 - 9/28		
		5168 - 9/29		
		6146 - 9/30		

THIS IS FINAL BILLING
ANY SHORTAGE SHOWN WILL BE
CANCELLED.

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RECEIVING REPO

0050011-1
No. 12952

VENDOR WONDER PRINTING LITHOGRAPH DATE 10-24-55
SHIPPER " " " P. O. NO. 9947 Reg 11988
REC'D VIA " " " FREIGHT BILL NO. —
PACKING SLIP NO. SUB NO. OF CONTAINERS —

SHIPPER " " " P. O. NO. 9947 KE9 11988

REC'D VIA _____ FREIGHT BILL NO. _____

PACKING SLIP NO. 504 NO. OF CONTAINERS —

ITEM	QUANTITY RECEIVED	PART NO.	QUANTITY		DESCRIPTION	WEIGHT	
			ACC.	REJ.		NET	GROSS
/	—				OFFSET PRINTING, PLATES, NEGATIVES, PUNCHING, GLUEING, FOLDING OF CLASSIFIED JOBS		
					MJO-5021	C.F.P.	
						STATINTL	

OFFSET PRINTING, PLATES
NEGATIVES, PUNCHING, GLUEING,
FOLDING OF CLASSIFIED JOB

MJO-5021

C.F.P.

STATINTL

REMARKS: *ohm.*

STATINTL

Block 164

DE
TO